

Guidelines for Providers

What constitutes a concern?

- Level of cognitive impairment (i.e. MMSE 8 versus 20).
- Guns stored loaded or unlocked.
- Driving problems in the last year.

What indicates a need for immediate action and what is the appropriate action?

- If the person is in possession of a gun: call VA police.
- Marked impairment clearly indicating inability to drive safely in a patient who drove in alone: i.e., blindness, severe physical impairment, significant confusion.
- Rapidly assess need for in-patient versus out-patient evaluation.
- If in-patient evaluation indicated then admit, otherwise refer to appropriate sources for further indicated evaluations AND refer to the social worker to obtain alternative transportation home.

Further risk assessment

- When you identify a significant problem, refer to the appropriate source for further evaluation.
- Evaluate for depression and aggression in persons who have guns and in patients who are giving up driving.

Discussing the problem with the patient and family

- The patient must give consent to include others in this discussion if he/she has decision-making capacity. If he/she does not have decision-making capacity, safety issues must be discussed with the appropriate surrogate decision maker.
- Review the educational pamphlet and develop an action plan with the patient and/or the surrogate.



Where to refer for driving evaluations

- Private sources and the New York State Office for the Aging can direct families and concerned friends to more information and assistance on addressing unsafe driving (518) 474-5731 or aging.state.ny.us/explore/index.htm
If requested, this office will send a copy of the "When You Are Concerned" booklet to concerned family and friends.
- New York State Department of Motor Vehicles for information or forms for families or concerned citizens to report an unsafe or at risk driver 1-(800) 225-5368 or www.nydmv.state.ny.us
- Depression, aggression: Mental Health (e.g., Psychology/Neuropsychology, Psychiatry)

Issues of confidentiality

- The patient must give consent to include others in this discussion if he/she has decision-making capacity. If he/she does not have decision-making capacity, safety concerns must be discussed with the appropriate surrogate decision maker. *VA providers should **not** contact Department of Motor Vehicles (DMV). It may be recommended to family or concerned citizens that they contact DMV directly.*

Are you required to report this?

- Liability and confidentiality concerns prevent VHA providers from sharing information about their patients with the State Department of Motor Vehicles without first securing consent and permission to Release of Information (ROI). Specific procedures for ROI must be followed.

Additional information on reverse side



Obtaining local resources for assistance after loss of driving

- Check with the local Area Agency on Aging. For assistance in finding a local Agency on Aging in NY call (518) 449-7080 or www.nysaaaa.org

Here's a list of the kind of programs and services they will be able to tell you about:

- congregate meal programs
 - recreational programs
 - cooling & heating subsidies
 - adult day care programs
 - health insurance counseling
 - in-home assistance
 - volunteer opportunities
 - caregiver support groups
 - friendly visiting
 - home delivered meals
 - regular & medical transportation
 - discount cards
 - respite
 - Alzheimer's and dementia programs
 - housing opportunities and services
 - home helper programs
 - legal services
 - telephone reassurance and more
- Alzheimer's Association and Related Disorders (AA/RD) Chapters. Contact the VA Dementia Care Manager at your facility for assistance.
 - Refer to the Mental Health and memory disorders specialty clinics as needed.

Documentation

In CPRS progress notes, the provider must document the assessments and discussions of safety issues, including use of educational materials (e.g. brochures). Your assessment of the decision-making capacity of the patient must be included.

Some Thoughts You May Want to Share With Patients and Families

You are not going to be able to drive your car to the cemetery, hand over the keys and step down into the box. More likely, you'll be fortunate enough to live a long life and in the process outlive your ability to drive. Not a bad deal when you consider the alternative!

The quality of life you will have in the future is dependent on the plans you make **known** to your family or caregiver while you are still able to make those decisions. (Notes from *When You are Concerned*; NY State Office for the Aging, 2001)

